



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re PATENT APPLICATION of

Inventor : EATON et al.  
Appln. No. : 10/654,379  
Conf. No.: : 4174  
Filed: : September 3, 2003  
Title: : PATIENT INTERFACE WITH FOREHEAD SUPPORT  
SYSTEM  
  
Group Art Unit : 3764  
Examiner : Unknown  
Docket No. : 01-24

\* \* \* \* \*

March 25, 2004

**FILING OF FORMAL DRAWINGS**

Hon. Commissioner of Patents  
and Trademarks  
Washington, D.C. 20231

Sir:

Please accept herewith the 10 sheets of formal drawings on 8½ x 11 size paper  
of Figures 1-12 ;

☒ which are in lieu of the informal drawing(s) filed earlier.

Each sheet of drawings includes the identifying indicia suggested in 37 C.F.R. § 1.84 (c) on the  
front of the drawing.

Respectfully submitted,

By Michael W. Haas

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**CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8(a)**

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the  
United States Postal Service on March 25, 2004 with sufficient postage as first class mail in an envelope addressed  
to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Michael W. Haas

Michael W. Haas, Reg. No. 35,174



## TRANSMITTAL FORM

(To be used for all correspondence after initial filing)

Application Number	10/654,379		
	Filing Date	September 3, 2003	
	Confirmation Number	4174	
	Inventor(s)	EATON et al.	
	Group Art Unit	3764	
Examiner	Unknown		
Total Number of Pages in This Submission:	12	Attorney Docket No.	01-24

### ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form (submit in duplicate) <input type="checkbox"/> Fee Attached \$ <input type="text"/> Check No.: <input type="text"/>	<input type="checkbox"/> Assignment Papers <input type="checkbox"/> Cover Sheet <input type="checkbox"/> Drawing Change Authorization Request and Amended Figure(s) <input type="checkbox"/> Request for Return of PTO-1449 Forms <input type="checkbox"/> Petition to the Commissioner <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Address <input type="checkbox"/> Terminal Disclaimer(s) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Request for Corrected Filing Receipt	<input type="checkbox"/> Issue fee Transmittal Form PTOL- 85(b) + (c) and cover sheet <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Request Letter <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund <input type="checkbox"/> Response to Missing Parts / Incomplete Application <input type="checkbox"/> Response to File Corrected Application Papers
<input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits / Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Cited References <input type="checkbox"/> Search report	<input checked="" type="checkbox"/> Drawing(s): Number of Pages <u>10</u> Number of Figs. <u>1-12</u> and cover sheet <input checked="" type="checkbox"/> Formal <input type="checkbox"/> Informal	
<input type="checkbox"/> Other Enclosure(s): _____		

Current Due Date: None

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Individual and Company	Michael W. Haas, Reg. No. 35,174 RESPIRONICS, Inc., 1010 Murry Ridge Lane, Murrysville PA, 15668
Signature	<i>Michael W. Haas</i>
Date	March 25, 2004

### CERTIFICATE OF MAILING

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Typed Name	Michael W. Haas, Reg. No. 35,174		
Signature	<i>Michael W. Haas</i>	Date	March 25, 2004